PGY1 Pharmacy Residency

VA Hudson Valley Health Care System

Castle Point Campus

41 Castle Point Road Wappingers Falls, NY 12590

Montrose Campus

2094 Albany Post Road Montrose, NY 10548



Accredited since 2008









U.S. Department of Veterans Affairs

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About VA HVHCS (Visit our facility's website at: http://www.hudsonvalley.va.gov/)

In 1996, two Veteran Administration Medical Centers (VAMCs) in Veterans Integrated Service Network (VISN) 2 South (formerly VISN 3) consolidated their services. It was the first locally initiated integration of its kind. In March of 1997, the Castle Point VAMC and the Franklin Delano Roosevelt (FDR) VA Hospital joined to become the VA Hudson Valley Health Care System (VA HVHCS), which now services 24,000 Hudson Valley Veterans annually. Consisting of two main campuses and a host of community based outpatient clinics (CBOCs), the VA HVHCS is dedicated to providing a wide range of services, including medical, psychiatric, and extended care.

FDR Montrose:

As the southern facility of the VA HVHCS, the FDR Montrose campus is located in northern Westchester County just 38 miles north of New York City. A former estate and original historic site of the mansion Boscobel or

"beautiful woods," this medical facility that opened in 1950, boasts one of the largest community home care programs for Veterans within the entire VA system. The program follows Veterans who live in community residences, providing a link to a full array of health and medical services available at both main campuses. The FDR Montrose campus provides services for acute and chronic mental health and extended care to a large geriatric population. Three residential programs specialize in recovery from substance abuse, post-traumatic stress disorder, and homelessness. Outpatient services includes primary care, mental health, dentistry, optometry, podiatry, and women's health clinics.

Castle Point:

The northern facility of the VA HVHCS, the Castle Point campus, opened in 1924 and is located on the scenic banks of the Hudson River, just 65 miles north of New York City. It delivers modern, progressive health care services to our nation's Veterans. A wide range of medical services, intermediate medicine, rehabilitation medicine, same-day surgery, and primary care are available at this facility. Various specialty care



services as well as outpatient mental health services are also available.

CBOCs:

There are a number of CBOCs in surrounding counties: Orange County (Goshen and Port Jervis), Sullivan County (Monticello), Rockland County (New City), Putnam County (Carmel), and Dutchess County (Poughkeepsie and Pine Plains). These clinics bring care closer to Veterans in the communities in which they live. These clinics bring care closer to Veterans in the communities in which they live and offer primary care, mental health services, and select specialist services. Of note, many of the specialists located at the two main campuses are also available through clinical video tele-health (CVT) technology.

Other:

VA HVHCS is part of a larger network of care, Veterans Integrated Service Network (VISN) 2 South, that includes VAMCs in the Bronx, Brooklyn, East Orange, Lyons, Manhattan, and Northport. Together they represent a comprehensive health care system available to Veterans throughout the NY/NJ area. A sharing relationship with Keller Army Hospital at West Point also provides Veterans with enhanced services.

Focusing on improving access and continuity of care, VA HVHCS provides innovative health care with an emphasis on performance improvement. A majority of our patients receive care through primary care clinics focusing on health promotion and disease prevention. We use the latest technology to provide high quality health care, including a computerized medical record, bar-coding for medication administration and an automated system for filling prescriptions. Patient and customer satisfaction is one of our top priorities. We continue to expand and improve health care programs and services to meet the needs of our patients. Veterans can receive information and care through patient education, preventive medicine, telephone advice systems, urgent care, acute and long-term inpatient care, outpatient care, rehabilitation, hospice and home health care services.

Program Overview

The post-graduate year one (PGY1) Pharmacy Residency Program at the VA HVHCS is designed to allow development of the PGY1 pharmacy resident into a clinical practitioner, who will contribute to positive outcomes in the practice of pharmacy. The program is a comprehensive, multi-site, health care system-based, 12-month (July 1 - June 30) post-graduate residency. PGY1 pharmacy residents completing the program will have the ability to accelerate their growth beyond entry-level professional competence in patient-centered, pharmacy operational services, and to further the development of leadership skills. In accordance with the American Society of Health-System Pharmacists (ASHP) accreditation standards, the goals of the program are to train pharmacists to develop the skills necessary to ensure optimal delivery of drug therapy to a wide range of patients, function competently and in partnership with other providers, investigate therapeutic problems in a scientific manner, become leaders in the medication use process, analyze and disseminate drug information to health care professionals and patients, and teach at an appropriate level.

The program offers comprehensive training with exposure to direct patient care in the outpatient and inpatient settings. Areas of focus in ambulatory care, although not limited to, include anticoagulation, diabetes, hypertension, dyslipidemia, congestive heart failure, chronic obstructive pulmonary disease, and patient compliance. Other key practice areas include long-term care, home-based primary care, infectious disease, inpatient and outpatient staffing, and pharmacy administration. In addition, the program is designed to provide PGY1 pharmacy residents with effective communication skills, foster development of clinical pharmacy programs and services, and appreciate cost-effective formulary management strategies. PGY1 pharmacy residents will develop professional maturity through demonstrating leadership and practice management skills, evaluating their own performance in the program, and educating patients and providers. The program integrates PGY1 pharmacy residents into the medication use process so that they develop a firm understanding of the clinical, distributive, and administrative aspects of the pharmacy profession.

Purpose

ASHP-accredited PGY1 Pharmacy Residency Program Purpose:

PGY1 Pharmacy Residency programs build on Doctor of Pharmacy (PharmD) education and outcomes to contribute to the development of clinical pharmacists responsible for medication-related care of patients with a wide range of conditions, eligible for board certification, and eligible for post-graduate year two (PGY2) pharmacy residency training.

VA HVHCS PGY1 Pharmacy Residency Program Purpose:

The VA HVHCS PGY1 Pharmacy Residency Program aims to train pharmacists to provided pharmaceutical care, primarily to ambulatory care, geriatric, and long-term care patients. PGY1 pharmacy residents will be prepared to work independently and participate as integral members of a healthcare team. They will provided education to patients and healthcare professionals. In addition, PGY1 pharmacy residents will learn to perform self-monitoring and demonstrate leadership through contributions to performance improvement. PGY1 pharmacy residents will encouraged to develop an approach to the profession that can lead to lifelong learning and career satisfaction.

Competency Areas

- Required:
 - Competency Area R1: Patient Care
 - ► Competency Area R2: Advancing Practice and Improving Patient Care
 - ► Competency Area R3: Leadership and Management
 - ► Competency Area R4: Teaching, Education, Dissemination of Knowledge
- ♦ **Elective:** **may be selected for specific PGY1 pharmacy residents
 - ► Competency Area E1: Pharmacy Research
 - ► Competency Area E2: Added Leadership and Practice Management Skills
 - ► Competency Area E3: Home Care Pharmacy
 - Competency Area E4: Managed Care Pharmacy
 - ► Competency Area E5: Management of Medical Emergencies
 - Competency Area E6: Teaching and Learning
 - ► Competency Area E7: Specialty Pharmacy
 - Competency Area E8: Health, Wellness, and Emergency Preparedness

Required Learning Experiences:

- Orientation
- Clinical Pharmacy Management
- Project
- Pharmacy Education
- Duty Hours
- Outpatient Staffing
- Inpatient Staffing
- Anticoagulation
- Primary Care/ Patient Aligned Care Team (PACT)
- Infectious Disease
- Pharmacy Administration
- Mental Health
- Home-Based Primary Care (HBPC)

Elective Learning Experiences:

- Advanced Primary Care/PACT
- Rural Primary Care/PACT
- Advanced Infectious Disease
- Pain Management
- Academic Detailing
- Chemotherapy
- Pharmacy Informatics

Learning Experiences

Structurally, the VA HVHCS PGY1 Pharmacy Residency Program is conducted as a series of required 4-6 week rotations and longitudinal learning experiences carried out at both the Castle Point and FDR Montrose campuses. PGY1 pharmacy residents are expected to simultaneously prioritize and work on ongoing clinical, didactic, administrative, and project activities. Time is split between the Castle Point and FDR Montrose campuses in a roughly 50:50 distribution. Limited exposure to our CBOCs and VISN 2 are offered on an elective basis. In addition, there is the opportunity for 2 elective learning experiences, which are used to customize the residency training. Learning experience scheduling will be made by the Residency Program Director (RPD) with several factors in mind. Some learning experiences are scheduled to optimize the experiences available and based upon preceptor availability. In addition, strengths and weaknesses of PGY1 pharmacy residents will be utilized to create development plans and make adjustments to maximize opportunities for learning and advancement of individual interests/needs. PGY1 pharmacy residents work closely with the RPD and their primary preceptor(s) to develop individual goals, objectives, learning activities, evaluations, and other changes to the residency program's overall plan that will assist them in expanding their skills for current and future pharmacy practice. Regular meetings with the RPD ensure that program requirements and the required ASHP competency areas, educational goals and objectives are being fulfilled.

Select Learning Experience Overview

Clinical Pharmacy Management: Throughout the residency year, residents obtain experience and training in formulary management, knowledge of the medication safety and reporting systems, committee participation, and involvement with professional organizations and networking. Residents are expected to establish professional relationships, as well as enhance their time management, decision-making, and communication skills. Residents are assigned various activities, including review of non-formulary drug requests for appropriateness, safety, and cost effectiveness; monitoring medication utilization to identify areas for improvement; drug monograph development; management of national VA PBM cost-saving initiatives; working on formulary conversions; completing medication use evaluations; and management of the adverse drug reaction program. Residents will also be required to attend VA HVHCS Nutrition/Pharmacy & Therapeutics Committee meetings.

Project: Completion of a major project of the resident's choosing and of primary importance to VA HVHCS is required. Residents will work with a designated project preceptor to plan, carry out, and evaluate the results of this project. Projects may include a medication use evaluation, a continuous quality assurance/improvement project, development/improvement of a clinical services, retrospective chart reviews, or other ideas may be presented for discussion. Comprehensive project results are typically presented at the Eastern States Pharmacy Resident & Preceptors Conference or an ASHP/ACCP affiliate meeting. Submission of a final project manuscript is also required.

Pharmacy Education: Residents engage in various educational experiences throughout the year. This includes opportunities in staff education, patient education, as well as pharmacy student oversight and instruction. Residents are afforded with experiences in preparing and delivering both educational and training sessions of various types to health care colleagues supplemented by readings, projects, and discussions (i.e. drug information, journal club, case presentations, pharmacy in-services, newsletters, etc.). Patient education may occur in the clinical setting, informal didactic settings, or other venues such as health care fairs. Residents also serve as co-preceptors for pharmacy students from St. John's University, Albany College of Pharmacy & Health Sciences, and other affiliated schools of pharmacy. Elective participation in a Teaching & Learning Certificate program is also offered.

Pharmacy Staffing: Residents are longitudinally exposed to both inpatient and outpatient pharmacy operations, with graduating levels of pharmacist responsibility. A minimum of eight hours per month of pharmacy staffing is required, and generally no more than 16 hours per month. Residents are NOT required to staff nights, weekends, or holidays.

Anticoagulation: This pharmacy-run clinic is responsible for managing all Veterans receiving warfarin and other anticoagulants from VA HVHCS. The clinic provides care for nearly 800 Veterans. Residents see patients in clinic and also complete telephone follow-up to ensure safe and effective use of anticoagulants. They also initiate anticoagulation therapy and participate in transitions of care from inpatient to outpatient. Furthermore, residents coordinate warfarin interruption for procedures, using low molecular weight heparin (LMWH) if warranted. Residents are involved with patient education regarding warfarin, direct acting oral anticoagulants, and LMWH as needed.

Primary Care/PACT: PACT teamlets at VA HVHCS include a primary care physician, a care coordinator, a clinical pharmacy specialist, a nurse, and other support personnel. Pharmacy-managed PACT clinics assist with the management of chronic disease states including but not limited to diabetes and dyslipidemia. Under the supervision of their pharmacy preceptor, residents provide direct patient care while supporting the multi-disciplinary PACT teamlet. Residents conduct chart reviews, patient interviews, limited physical assessments, and develop appropriate pharmaceutical care plans including applicable laboratory testing, medication orders, scheduled follow-up, and documentation in a timely & efficient manner. Residents help optimize patient care through delivery of patient education, recommendation of lifestyle modifications, and pharmacologic interventions based upon the most recent VHA guidelines and current literature. Medication titration and adjustments are performed with timely follow-up to ensure patient safety with medication use. Residents will also serve as a drug information consultant for the PACT team, fulfill other CPS responsibilities, and provide comprehensive pharmaceutical care services to scheduled clinic patients.

Infectious Disease: The infectious disease (ID) team consists of two ID physicians, a clinical pharmacy specialist, a registered nurse, and a social worker. Residents assist the ID team by providing patient education and medication monitoring, especially in the areas of HIV and hepatitis C. In doing so, residents are expected to review patient medication profiles for drug-drug and drug-disease interactions, evaluate and monitor pertinent laboratory data, offer patient specific recommendations to optimize treatment, and provide extensive patient education to enhance medication compliance and reduce adverse effects. Other learning activities include pharmacokinetic monitoring of antibiotics (i.e. aminoglycoside, vancomycin) drug levels for inpatients, daily antimicrobial stewardship, participation in the ID consultation service, surveillance of appropriate antimicrobial use, and provision of treatment guidelines for primary care providers regarding travel prophylaxis.

Application Requirements:

- Letter of intent*
- Curriculum vitae
- Official college transcripts (College of Pharmacy)
- Three references (PhORCAS standardized reference form is sufficient)
- Proof of US citizenship (i.e. birth certificate, passport)
- *The letter of intent should include the answers to the following three questions:
- (1) Why do you want to do this residency?
- (2) What are your personal and professional strengths/areas for improvement?
- (3) What are your short-term or long-term career goal?

Application materials should be submitted through the Pharmacy Online Residency Centralized Application Service (PhORCAS). Additional information on PhORCAS may be found at:

http://www.ashp.org/phorcas

All application materials must be received by **January 8th** in order to be considered for an interview.

Program Strengths

- Multi-site exposure to a wide variety of clinical practice settings, with emphasis on primary/ambulatory care.
- Credentialed and experienced pharmacy preceptors.
- Flexible schedule and learning experiences tailored to the PGY1 pharmacy resident's area(s) of interest.
- Autonomy of clinical pharmacy specialists and exposure to clinical privileges.
- Experience co-precepting pharmacy students.
- Elective Teaching & Learning certificate program offered through the University of Connecticut.
- Participation in direct-patient care disease management clinics including: diabetes, hypertension, dyslipidemia, congestive heart failure, chronic obstructive pulmonary disease, anticoagulation, hepatitis C, etc.

Benefits

- Competitive Stipend (estimated \$47,567)
- ♦ 13 paid annual leave days/13 paid sick days/10 paid federal holidays
- Subsidized health insurance
- Vision/dental benefit offered
- Free parking/lab coats/fitness center access
- Funds may be available to attend national and regional pharmacy conferences

Eligibility

Applicant must be a US citizen (a requirement to be employed by the Department of Veterans Affairs) and be a graduate or candidate for graduation from an ACPE accredited Doctor of Pharmacy (PharmD) degree program. Applicant shall be licensed or eligible for licensure in any state. Applicant must be able to commit to the VA HVHCS PGY1 Pharmacy Resident Program for a period of no less than one year, and be a highly motivated individual who desires advanced education and training leading to enhanced level of professional practice in pharmacy.

Formal Interview & Selection

Candidates will be contacted for a formal on-site interview. A performance-based interview will be conducted. Interview process also includes a 10 minute formal presentation. Therapeutic topic/case discussions may also be included in the interview process. Residency selection is made through the ASHP Resident Matching Program (http://www.natmatch.com).



National Matching Code: #135013

For more information regarding the PGY1 Pharmacy Residency, please send all correspondence to:

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